



DASVET MEMORANDUM: 01-08

FOR: ALL REGIONAL ADMINISTRATORS AND DIRECTORS FOR
VETERANS' EMPLOYMENT AND TRAINING

FROM: JOHN M. MCWILLIAM

SUBJECT: The REALifelines Technical Assistance Guide (TAG)

This Recovery and Employment Assistance Lifelines (REALifelines) Technical Assistance Guide (TAG) incorporates contents and concepts that provide additional detailed information about REALifelines procedures. This TAG will be updated by a future Director's Memorandum (DM) as the REALifelines Program evolves and more procedures and systems are developed.

I. REALifelines Background:

The REALifelines program was formally launched by the U.S. Department of Labor, Walter Reed Army Medical Center and The National Naval Medical Center, Bethesda, on October 4, 2004. Since the launching of this program, a joint collaboration across federal agencies regarding Federal and civilian services provided to wounded, injured and disabled service members has been established. Full-time REALifelines personnel have been located at Department of Defense (DoD) facilities, including Military Medical Treatment Facilities (MTF) to ensure coordination on the full array of employment and training services provided through the public workforce

system. The program provides assistance with a wide variety of supportive services leading to employment for REALifelines participants.

VETS is the lead agency for implementation of employment assistance services for REALifelines participants. VETS in collaboration with DoD, Veterans Administration (VA) and State Workforce Agencies (SWAs) will identify potential REALifelines participants and provide the necessary assistance and services to assist these participants in making a successful transition to the civilian workforce.

II. REALifelines Participants:

Program participants are transitioning service members and veterans who were seriously wounded or injured in Operation Iraqi Freedom (OIF) or Operation Enduring Freedom (OEF) who require or request employment or reemployment services to help them transition from the military to the civilian workforce.

REALifelines participants should be provided the full array of services available, to include:

1. intensive employment services
2. labor market information
3. career counseling or vocational guidance
4. reemployment rights information
5. job development and short-term placement opportunities (for example, Operation War Fighter)
6. job training, job referral and placement
7. referral to other federal, state, community or faith-based organizations to assist in addressing barriers to employment, training, or benefits.

REALifelines participants are generated from the following sources:

1. Case Managers (CM) at the MTFs (these are DVOPs or LVERs who provide case management to REALifeline participants. In some states they are referred to as Career Coaches)
2. Program Representatives outstationed at Military program headquarters
(Army Wounded Warrior, Marines for Life, . . .)
3. VETS Staff at Military OneSource
4. VETS and SWA staff – Through their everyday work, staff will encounter servicemembers and veterans that qualify for REALifelines.

III. VETS' REALifelines Director – Roles:

The Director of Operations and Programs will be the Agency lead for the REALifelines Program and has the following responsibilities:

1. Assign and supervise a REALifelines Program Manager to supervise and manage the day to day operations of the REALifelines program.
2. Coordinate with VETS' National Office (NO) and Regional Administrators (RAVET) on all operational and data reporting matters.
3. Keep the Assistant Secretary and the Deputy Assistant Secretary abreast of all operational issues impacting on the success of the program.

IV. REALifelines Program Manager – Roles:

The REALifelines Program Manager will be the primary liaison with all DoD components and other Federal agencies. He/she will serve as the REALifelines central point of contact for internal staff and other federal partners.

The REALifelines Program Manager will perform, at a minimum, the following functions:

1. Provide technical assistance and support to the regional field staff on the day to day operations of the program.
2. Network and establish relationships with all DoD components and other Federal agencies.
3. Maintain a National spreadsheet of all REALifelines participants who are active in the program as well as those that have enjoyed a successful outcome and those that are no longer in the program.
4. Compile and analyze monthly activity reports submitted by the regional offices.
5. Collect and report best practices and success stories from DoD/VA and VETS Regional Offices.
6. Coordinate and provide technical assistance to partners and – through the applicable RAVET - to field staff for other initiatives and potential specialized programs (such as Operation Warfighter and Disabled Veterans Hiring Initiative) that would benefit REALifelines participants.

V. RAVET – REALifelines Roles:

The VETS Regional Administrator will designate a Regional Coordinator, full-time or part-time, to lead VETS' REALifelines regional operations. The RAVET, through his or her designated coordinator(s), will:

1. Compile and submit the REALifelines reporting spreadsheet monthly to the National Office REALifelines Program Manager.
2. Refer and track all REALifelines participants received from outside sources via a contact sheet.

3. Assist in the negotiation of State procedures for assuring the provision of satisfactory services to REALifelines participants by the Disabled Veterans' Outreach Program (DVOP) specialist or other SWA staff.
4. Negotiate relationships (including formal agreements where appropriate) with other federal agencies and programs at Regional/State levels – particularly to include DOL's Employment and Training Administration (ETA) and the Department of Veterans Affairs' (VA) Vocational Rehabilitation and Employment (VR&E) program – to assure collaboration regarding REALifelines policy development and services to include TAP/ACAP and DTAP that already exists on the installation.
5. Identify MTFs, medical hold companies, other treatment facilities and transition points within the Region. Ensuring outreach and/or coverage of all such facilities to ensure that all potential REALifelines participants are identified and provided services as outlined in the program.
6. Ensure that each major MTF is assigned a VETS staff person and an out-stationed DVOP either part-time or full time depending on need.
7. Submit program success stories to the NO Program Manager.

VI. DVET – REALifelines Roles:

The DVET will serve as the primary liaison between the region, REALifelines participant, State Workforce Agency (SWA) and other local partners.

The DVET will function as the REALifelines lead for the state, negotiating the structure and processes for all REALifelines activities amongst the REALifelines partners.

1. The DVET/or designee, upon receipt of a contact sheet from the Regional Coordinator, will:

a. Make direct contact with the participant to determine their needs and desires within 48 hours of receipt. Initial contact should be by telephone. After three failed attempts by phone, send a letter and e-mail if possible, describing services available, contact info and a seven day return-by date.

b. If a response to the letter and/or e-mail is not received by the date provided the case should be closed. Document all attempts with a thorough explanation as to why no further action will be taken

NOTE: The DVET will not delegate the responsibility of initial contact to the State Workforce Agency.

c. Upon contact, discuss, explore, and explain the employment and training opportunities available in general, taking into account state/local prevailing employment conditions.

d. After initial contact, refer participants to the SWA, ensuring that intensive services are delivered to each REALifelines participant and provide a 90 day follow-up on all participants after positive employment and/or training outcomes, or no more than 90 days from the last contact by SWA staff.

2. Negotiate with the SWA to develop a standard process for referral of REALifelines participants to local SWA resources for assistance. This should include agreement on the specific SWA person(s) name and contact information so that person may be contacted by the DVET and/or participant when the need arises to arrange for intensive services at a particular Service Delivery Point

- (SDP) in the SWA system. The agreement should include the services that will be performed by JVA staff (for the service member).
3. Report to the Regional Coordinator any barriers in state, local or Federal systems that prevent proper assistance for REALifelines participants and assist in the development of workable solutions to address those barriers, such as by inclusion in the State's JVA grant Plan of Service.
 4. Assign a VETS staff member to the major MTFs to liaison and build relationships with the military. This VETS staff member may not be a full time resident at the MTF but will be the face of the REALifelines program and act as the VETS field program manager at that specific MTF, arranging logistics, administrative support, scheduling briefings and meetings with the command and other appropriate partners. A DVOP will also be assigned to provide services. The VETS staff member will also be responsible for providing referrals following the outlined referral process on page 10 herein via the contact sheet on an as-needed basis.
 5. Negotiate with the SWA to ensure a DVOP is out stationed at the major MTFs to provide intensive services through case management. The DVET will ensure that the DVOP is providing the full range of workforce services to include intensive services.
 6. Collect and report best practices and success stories to the Regional Coordinator.
 7. Report on the status of REALifelines participants monthly utilizing the REALifelines reporting spreadsheet.

VII. SWA Roles:

The SWA will deliver intensive services to REALifelines participants upon referral by the DVET. The DVET may also refer the spouses of REALifelines participants to the SWA One-Stop system for any appropriate services which are outside of the JVA grant.

The DVOP or other SWA staff will establish a separate case management record (in accordance with NVTI case management guidance) for the REALifelines participants.

When a DVOP or other designated SWA staff member receives a REALifelines participant referral from a DVET, he/she will provide intensive services following the guidelines established by VPL 07-05, Section VII (A)(1) for intensive services by DVOP specialists:

1. DVOP specialists facilitate intensive services. In order to qualify as intensive services, DVOP specialists may include any combination of the following services, but at a minimum the first two are required.
 - a. Conduct an assessment (minimum requirement)
 - b. Develop plan of action that is documented (minimum requirement).
 - c. Date the JVA completes a Needs Assessment.
 - d. Barriers to employment are described by the JVA CM.
 - e. Date the JVA CM completes a Plan of Action for Intensive Services.

The plan of action developed by the DVOP or other designated employment services professional – for intensive services to a REALifelines participant- will include initial and ongoing coordination of that plan of action with the DVET.

The direct case management implemented by the DVOP or other designated employment services profession ensures and establishes a realistic achievable individualized Plan of Action for each REALifelines participant. This is the foundation of the REALifelines program. Such coordination will continue until the intensive services are concluded by the SWA.

This plan should be a consolidated effort among all necessary providers: VA or State Vocational Rehabilitation, VA Medical Center, Vet Center, Workforce Investment Act providers, etc.

VIII. REFERRAL PROCESS:

It is recognized that REALifeline participant referrals will be coming from multiple locations: the case managers assigned to the major MTFs, the VETS staff outstationed at the military program headquarters, local VETS staff delivering a briefing to a medical hold unit, etc. For that reason, it is critical that we ensure a standard referral process. This will allow the tracking of all participants receiving services through the program.

A contact sheet (attached) is to be prepared as thoroughly as possible for each participant in the program. The completed contact sheet is to be sent electronically to both the losing and gaining Regional Coordinators for their action. A listing of the Regional Coordinators can be found at attachment 4. The gaining Regional Coordinator will enter the participant in the tracking spreadsheet and forward the referral to the gaining DVET for appropriate action in-line with the responsibilities listed above.

As an example, for a REALifelines participant identified at an MTF who will be returning home, the following procedures will be adhered to.

1. The Career Coach or DVOP creates or updates the contact sheet on the participant;
2. The Career Coach or DVOP sends, via e-mail, the contact sheet to the Regional Coordinator for the location of the MTF (losing Regional Coordinator) and the Regional Coordinator for the location of the participant's home (gaining Regional Coordinator);
3. The gaining Regional Coordinator will log the participant for tracking and reporting purposes and send the contact sheet, via e-mail, to the appropriate DVET;
4. The DVET will make the initial contact with the participants; and
5. The DVET will assign the participant to a local DVOP for the provision of case management through intensive services.

IX. REPORTING:

It is vital to the success of the RLL Program that strict recording and reporting guidelines are established and adhered to. Internal regional spreadsheets and reporting outcomes may be utilized; however, the roll up report will be consistent for VETS.

A master list of REALifelines participants has been developed and will be maintained by VETS REALifelines Program Manager. Pertinent data will be shared with other partners as determined appropriate by VETS.

REALifelines, because of its unique participant base, must measure positive outcomes in a broader sense than a traditional VETS employment and training program. Positive outcomes will include:

1. Entered Employment (EE) Credit
2. Return to active duty
3. Entered new training
4. Reenter training
5. Attending formal education vocational or academic
6. Self-employment
7. Enrolled in any professional training or rehabilitation program
8. Re-employed in previous position with necessary accommodations.

If a veteran becomes an active VR&E participant, they should be counted as a positive outcome and as a REALifelines participant.

VETS regional field staff will no longer be required to access the Military Severely Injured Tracking System (MSITS) data base and make data entries.

The following steps will comprise the reporting process:

1. A contact sheet (attached) will be prepared for every participant.
2. A baseline tracking list of all participants will be developed by each Regional REALifelines Coordinator utilizing the attached contact sheet.
3. A Regional original list (which would include all REALifelines participants starting on October 1, 2004 but exclude family or primary care givers or non OIF/OEF military members or veterans that were

referred at that time) will be forwarded to the NO Program Manager no later than 90 days after this TAG is published.

4. The REALifelines Program Manager will consolidate the Regional lists for tracking purposes. This baseline VETS master tracking list can also assist the Director of Operations and Programs, the ASVET and the DASVET in determining the actual success of the program to date as well as develop realistic future goals and desired outcomes for each Region.
5. The master tracking list will be maintained at the National level, but shared with the regions and other partners to be determined by VETS in order to assist in identifying trends and the possible need to divert resources to areas with extremely high workloads.
6. The attached monthly reporting spreadsheet (attachment 2) will be completed by the Regional REALifelines Coordinator, reviewed by the RAVET and forwarded to the NO REALifelines Program Manager no later than the 5th working day of each month.

Spreadsheets for both the Region and the State are used to standardize the reporting procedures throughout the Agency.

X. Attachments:

1. Contact Sheet
2. Spreadsheet Instructions
3. Spreadsheet
4. Regional Coordinator Listing

Attachment 1

Contact Sheet

1. **Last Name, First Name, Middle Initial**
2. **Street Address**
3. **City, State, Zip**
4. **Home phone**
5. **Cell Phone**
6. **Contact number at Home of Record:** *(If contact sheet is being filled out at a Medical Hold company, please be specific with the SM that a telephone number that they can be contacted at is available if they are discharged and their current phone and cell phone are disconnected.)*
7. **E-mail address**
8. **Branch of service**
9. **Immediate Needs:** *(If they are planning on returning to previous employer, do they think that they will need accommodations in order to perform previous duties? Explain to them that they may want to talk to the DVET in their home state regarding this issue.)*
10. **Expected date of discharge:**
11. **Employment needs:**
12. **Employment plan after discharge** - Desired Career Path, Barriers to employment if any.

13. Chronological Date log of actions taken by CM(s)

Note 1: *This sheet will be used electronically to forward to the DVET, then to the RLL Regional Coordinator, who will forward it to the appropriate RLL Regional Coordinator where the veteran will be living after their discharge.*

Note 2: *In order to ensure that no SM falls through the cracks, a contact sheet should be filled out on every SM who is not remaining on active duty and then forwarded to the DVET. Past experience has shown that when the CM staff at the MTF's forward the information to another CM and not through the Region, we have no way of conducting follow up or accounting for the individuals who were provided services.*

*When the contact sheet is forwarded, all contact, by VETS staff, CM staff, etc., should be done on one sheet. This is the purpose of forwarding electronically (please see the example below). This eliminates loss of notes. The CM staff can also use this for their case management folder if appropriate with their state policy. **Under no circumstances should the SSN or the actual disability and or injury be placed on these sheets.** The CM name and phone number are on the sheet and if this information is necessary, the gaining SWA can contact the original CM.*

Attachment 2

Instructions: Spread Sheet Columns and Definitions:

A: Date Rcvd: The date the vet's info was received from the Region.

B: Last name: Veteran's last name

C: First name: Veteran's first name

D: Carry over from previous FY: If the case is a carry over from the previous FY, place a "1" in this column

E-G: # Contacted by Phone: Attempt three phone calls, once per week, to make contact with the veteran. If contact was **not** made place a "1" in this column

H: Have Been Contacted: If contact has been made place a "1" in this column.

I: Unable to Contact: If unable to contact because their whereabouts are unknown, bad contact information etc. place a "1" in this column.

J: DVET Letter: After three failed attempts by phone, send a letter describing services available, contact info and a seven day return contact by date. If a response to the letter is not received by the date, close the case. Reopen if a response is received. If a letter was sent, place the date the letter was mailed in this column.

K: Registered in SWA: Is the veteran registered in the state workforce agency system? If so then place a "1" in this column.

L: Rcvd Needs Assessment: Place a "1" in this column if a needs assessment was completed.

M: Not Employment Ready/No Services Desired or No Services Required: Place a "1" in this column if the veteran has indicated he/she is not employment ready, desires no services or requires noservices.

N: Actively being case managed: Place a “1” in this column if the case is actively being managed.

O: Spouse or Caregiver: Place a “1” in this column if SWA is providing assistance to a spouse or caregiver.

P: REALifelines Qualified: Place a “1” in this column if the veteran is qualified for REALifelines intensive services.

Q: Not REALifelines Qualified: Place a “1” in this column if the veteran is not qualified for REALifelines intensive services, but qualifies for services provided through the Public Labor Exchange.

R: VR&E Participant: Place a “1” in this column if the veteran is currently participating in the VR&E program.

S: Successfully Employed: Place a "1" in this block if veteran is successfully employed.

T: Hire Date: Date of hire or beginning school, schedule 90 day follow-up from this date

U: 90 Day Follow-Up Completed: The date that the follow-up contact will be completed. This date is 90 days from employment date, participation in VR&E, etc.

V: USERRA: Place a "1" in this column if a USERRA case has been opened.

W: Closed: Closed: DVET letter sent after 3 phone contact attempts, no services needed, desired or not ready for employment. Reopen if the veteran should contact the DVET wanting assistance. If services are provided, the veteran is hired or a VR&E participant close after a 90 day follow-up contact.

X: Open: Currently the case open/active, services are being provided and are being handled by DVET, DVOP/LVER.

Y: Comments: Any helpful explanatory notes.

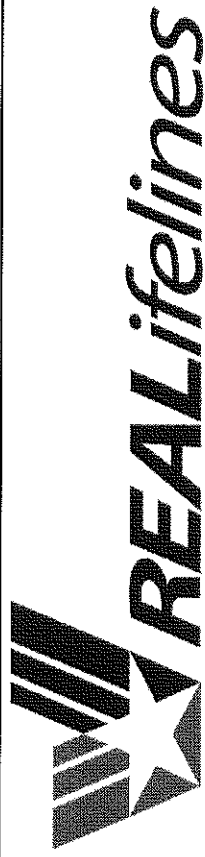
Z: Date Contact Sheet provided to DVOP/LVER: OPTIONAL. The date the Contact Sheet was provided to the DVOP/LVER.

AA: DVOP/LVERs Name and Phone Number: The name and phone number of the DVOP or LVER who are handling the case management.

Attachment 3

Spreadsheet's current scale is for presentation purposes. The Actual tool to be used in the field would be larger and possibly expanded to two (2) pages.

NER = Not Employment Ready
NSD = No Services Desired
NSR = No Services Required



Attachment 4 Regional Coordinator Listing			
Name	Site	EMAIL	Phone
Alvarez, Angel	ATL Region CC (NC ADVET)	alvarez.angel@dol.gov	(919) 733-7402/856-4792
Thompson, Barbara	BOS Region CC (ARA)	thompson.barbara.a@dol.gov	(617) 565-2080
Knox, Lane	CHI Region CC (HVF/RLL Primary)	knox.lane@dol.gov	(312) 886-0697
Watson, Don	DAL Region CC (IPA)	watson.donald@dol.gov	(214) 767-4987 ext 22
Bythwood, Ron	PHL Region CC (HVF)	Bythwood.Ronney@DOL.gov	(215) 861-5390
(Vacant)	SFO - REGION CC West Coast		
Tom Pearson	SFO-DVET WA	Pearson.Thomas@dol.gov	(360) 438-4600
current as of	3/6/2008		
NO - National Office	HVF - Hire Vets First	MTF- Military Treatment Facility	## = No MSITS access